

Request For Quotation/ Invitation To Bid Issued by State of Indiana OPEN

Vendor 9999999999
Remit to: PUBLIC NOTICE TO VENDORS
STATE OF INDIANA
DEPARTMENT OF ADMINISTRATION IN

Name&Address of Vendor: 9999999999
PUBLIC NOTICE TO VENDORS
STATE OF INDIANA
DEPARTMENT OF ADMINISTRATION IN

RFQ/ITB ASA-11-009	Date 09/28/2010	Delivery Date 12/01/2010	Page 1 of 5
Fund/Object/Center:			
Dept Number:			
Project Number:			
Requisition No:			
Buyer:		TDEATON	
Reporting Code:			
Federal ID:			
Agency Number:		00061	
Facility:		Various locations State Wide	

Ship To: Various Agencies
Various Locations - See Comments

Please Follow Instructions Included in Solicitation Package
Must be returned by(time and date): **10/26/2010 15:00:00**
Request Information from Buyer listed in Box in Upper Right Corner

****NOTICE:** All prices are assumed valid for ninety (90) days from Quotation opening date unless otherwise noted.

Line	Quantity	UOM	Item No/Description	(FOB Destination)	Unit Price	Extended Amt
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This is a request to establish a Quantity Purchase Agreement for Patrol Boats for DNR to begin January 1, 2011 or from date of last State signature, whichever is later, and end December 31, 2011 or one year after the State's last signature, whichever is later. QPA can be mutually renewed yearly for three additional years under the same terms and conditions. Renewals subject to the approval of the Department of Administration and the State Budget Agency. Total term of this agreement including all renewals, shall not exceed four years.

Supply the name and phone number of the contact for placing orders:

Name: _____
Phone No: _____ Fax: _____
E-mail Address: _____

The vendor agrees to charge these prices for any products ordered on any QPA release received after the expiration date, but issued prior to the expiration date, and postmarked no later than 14 business days after the QPA's expiration date.

Quantities are estimates, could be more or less AND COULD BE SHIPPED TO ANY STATE AGENCY WITHIN THE STATE OF INDIANA. PLEASE BID ACCORDINGLY.

The awarded vendor must maintain, at a minimum the information listed below in excel format and supplied to the State within one week of the request.

The report must include purchases from State Agencies and any Political Subdivision's purchases.

- * Entity Name
- * Entity Address
- * Date of Order
- * Purchase Order Number
- * Description of Goods Ordered
- * Quantity
- * Order Total

Vendor must be able to allow Multiple Delivery on one QPA Release.
As required by IC 4-13-2-14.8:

Notwithstanding any other law, rule, or custom, a person or company whom has a contract with the State or submits invoices to the state for payment shall authorize in writing the direct deposit by electronic funds transfer of all payments by the state to the person or company. The written authorization must designate a financial institution and an account number to which all payments are to be credit.

ATTENTION - New requirements. Prior to award of this solicitation your business must register as a bidder at www.buyindiana.in.gov. Just click on "Register your Business to do business with the State" Please be sure to complete the Buy Indiana certification page. It is preferred that businesses register immediately so that delay of solicitation award would not occur. This registration is maintained by you and you may update your information at any time. It remains in the database and covers all solicitation responses you submit to any state agency. It is very important that it be kept current. If you do not have access to a computer, you may call 317-234-0234 for assistance with your registration.

All companies desiring to do business with state agencies must complete an "Indiana Economic Impact" form. The form asks for, among other information:

- a. The amount of the contract that is being allocated for payroll and benefits to Indiana residents
- b. The amount that is being awarded to Indiana subcontractors and suppliers
- c. The amount that is being subcontracted to Indiana certified minority and women owned businesses

The collection and recognition of the information collected with the Indiana Economic Impact form places a strong emphasis on the economic impact a project will have on Indiana and its residents regardless of where a business is located. The collection of this information does not restrict any company or firm from doing business with the state.

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If the M/WBE participation level will exceed or fail to meet the goals outlined in the contractor's proposal, you must notify the M/WBE office immediately at MWDBE@idoa.in.gov. In the event that the contractor fails to report changes in participation attainment, demonstrate a good faith effort to reach the participation goals, pay the MBE and WBE in a timely manner or satisfactorily resolve any outstanding claims, the department may elect to withhold a disputed amount from the payments due to the contractor, suspend or terminate the contract, recommend suspension of the contractor's certification status with the public works division, and/or suspend, revoke, or deny the MBE or WBE certification and eligibility to participate in the MBE or WBE program per (25 IAC 5-7-8).
NOTICE TO INDIANA SMALL BUSINESS BIDDERS

The vendor assures that if they are receiving this award based on the Indiana Small Business Preference that the vendor will be performing a minimum of 80% of the work involved with their own forces. This contract is not assignable either in whole or in part, nor shall it be subcontracted after award without the State's prior written consent.

By signing the certification page of the solicitation package you are certifying adherence to all bid requirements as well as the above notice.

Vendor must complete their bid in the attached Excel file and submit this file to the State. When submitting the Excel file with their bid prices, the vendor must send one (1) electronic copy on CD and one (1) hard copy. In addition to inviting you to bid, the IDOA requests the following:

- 1.You should submit a copy of current catalog. Prices quoted will be guaranteed for one year from the start date of contract. At renewal time, the successful vendor may submit a new published price list/catalog with revised catalog pricing.
2. Indicate a percentage discount (if any) that will be offered to the State of Indiana for items on the current price list but are not covered in this Invitation to Bid. Proposed Discount:_____%.
Indicate the catalog page number(s) for the item(s) only covered by the discount.
Pages:_____.
3. By submitting a percentage discount, you agree that the discount will be in effect for the term of this contract and any subsequent mutual renewals.

The successful vendor(s) will also be required to submit at least two (2) copies of the catalog(s) to all DNR Properties that make a request. These catalogs must be the same catalogs submitted with the bid and must reflect the requisition number. Some of your catalog items may be restricted due to availability from another resource, such as a State Use facility, previously established QPAs, etc.

1	10.00	EA	000000000100115433	Boat, Patrol, Motor, 19'
Manufacture Name _____				
Manufacture Part # _____				
M/WBE _____				
2	1.00	EA	000000000100115434	Boat, Patrol, Motor, 21'
Manufacture Name _____				
Manufacture Part # _____				
M/WBE _____				
3	1.00	EA	000000000100115435	Boat, Patrol, Motor, 23'
Manufacture Name _____				
Manufacture Part # _____				
M/WBE _____				
4	1.00	EA	000000000100115436	Boat, Patrol, Motor, 25'

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Manufacture Name _____ Manufacture Part # _____ M/WBE _____						
5	1.00	EA	000000000100115437	Boat, Patrol, Motor, 27'		
Manufacture Name _____ Manufacture Part # _____ M/WBE _____						
6	1.00	EA	000000000100115438	Boat, Patrol, Motor, 29'		
Manufacture Name _____ Manufacture Part # _____ M/WBE _____						
7	1.00	EA	000000000100115439	Boat, Patrol, Motor, 31'		
Manufacture Name _____ Manufacture Part # _____ M/WBE _____						
8	1.00	EA	000000000100115440	Boat, Patrol, Motor, 33'		
Manufacture Name _____ Manufacture Part # _____ M/WBE _____						
9	1.00	EA	000000000100115441	Boat, Patrol, Motor, 35'		
Manufacture Name _____ Manufacture Part # _____ M/WBE _____						
10	10.00	EA	000000000100115442	Trailer, for 19' boat		
Manufacture Name _____ Manufacture Part # _____ M/WBE _____						
11	1.00	EA	000000000100115443	Trailer, for 21' boat		
Manufacture Name _____ Manufacture Part # _____ M/WBE _____						
12	1.00	EA	000000000100115444	Trailer, for 23' boat		
Manufacture Name _____ Manufacture Part # _____ M/WBE _____						
13	1.00	EA	000000000100115445	Trailer, for 25' boat		

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Manufacture Name _____ Manufacture Part # _____ M/WBE _____						
14	1.00	EA	000000000100115446	Trailer, for 27' boat		
Manufacture Name _____ Manufacture Part # _____ M/WBE _____						
15	1.00	EA	000000000100115447	Trailer, for 29' boat		
Manufacture Name _____ Manufacture Part # _____ M/WBE _____						
16	1.00	EA	000000000100115448	Trailer, for 31' boat		
Manufacture Name _____ Manufacture Part # _____ M/WBE _____						
17	1.00	EA	000000000100115449	Trailer, for 33' boat		
Manufacture Name _____ Manufacture Part # _____ M/WBE _____						
18	1.00	EA	000000000100115450	Trailer, for 35' boat		
Manufacture Name _____ Manufacture Part # _____ M/WBE _____						
19	10.00	EA	000000000100115451	Ladder, Dive for Patrol Boat		
Manufacture Name _____ Manufacture Part # _____ M/WBE _____						
20	10.00	EA	000000000100115452	Bow Docking for Patrol Boat		
Manufacture Name _____ Manufacture Part # _____ M/WBE _____						
21	10.00	EA	000000000100115453	On-Board Wash-Down System, for Patrol Boat		
Manufacture Name _____ Manufacture Part # _____ M/WBE _____						
22	10.00	EA	000000000100115454	Trim Tabs		

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Manufacture Name _____
Manufacture Part # _____
M/WBE _____

The following UN/CEFACT Unit of Measure
Common Codes are used in this document:
EA Each

<p>To be valid, all Quotations/Bids must be Signed manually.</p> <p>The State of Indiana reserves the right to accept or reject whole or any part of, the foregoing Quotation/Bid.</p>	Representative Signature certifies no quotation/bid on this request has been submitted by officers, representatives or an affiliate of this firm under another name.		When can you ship?
	Please correct above Address	Typed Name of Representative	Telephone Number ()
		Title of Representative	Date of Quotation